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| B1 (Official  | Form 1)(1/  | 08)                                    |   |   |   | oamon  |   | igo ± o  |  |   |  |  |
|---|---|--|---|---|---|--|---|--|--|---|--|--|
|   |   |  | United<br>No                                  |   |   | ruptcy<br>of Illino  |   | ,  |  |   | Vo   | luntary Petition   |
| Name of Debtor (if individual, enter Last, First, Middle):  Angle, John T.  |   |  |   |   |   | e of Joint Dongle, Kath  | ebtor (Spouse<br>ny A.  | e) (Last, First  | , Middle):                                   |   |  |  |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  |   |  |   |   |   | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): |   |  |  |   |  |  |
| Last four di  | one, state all)                                       | Sec. or Indi                           | vidual-Taxp                                   | ayer I.D. (   | (ITIN) No./   | Complete E   | (if mo  | four digits ore than one, s  | state all)                                   | r Individual-   | Taxpayer I   | I.D. (ITIN) No./Complete EIN   |
| Street Addre  |   | *                                      | Street, City,                                 | and State)  |   | ZIP Code   | Stree<br>16   |  | f Joint Debtor<br>e Ave.                     | (No. and St   | reet, City,  | ZIP Code   |
| County of R   | Residence or  | of the Prin                            | cipal Place o                                 | f Business  |   | 60107  |   | ty of Reside   | ence or of the                               | Principal Pl  | ace of Bus   | 60107  |
| Mailing Add   | dress of Deb  | otor (if diffe                         | rent from str                                 | eet addres  | ss):  |  | Mail  | ng Address   | of Joint Debt                                | tor (if differe   | nt from str  | reet address):   |
|   |   |  |   |   | Г   | ZIP Code   | :   |  |  |   |  | ZIP Code   |
|   | Principal A from street                               |  | siness Debtorove):                            | ſ   | <u>'</u>  |  |   |  |  |   |  |  |
| See Exh   | (Form of C<br>(Check<br>nal (includes<br>ibit D on pa | ge 2 of this es LLC and t one of the a | form. LLP) bove entities,                     | □ Sing in 1 □ Rail □ Stoo □ Con □ Clea □ Othe □ Deb | (Check lth Care Bu gle Asset Ro 1 U.S.C. § road ekbroker nmodity Br nring Bank er  Tax-Exe (Check box tor is a tax- | eal Estate as<br>101 (51B)   | s defined   | define   | the 1<br>ter 7<br>ter 9<br>ter 11<br>ter 12  | Petition is F   | hapter 15 la Foreign hapter 15 la Foreign hapter 15 la Foreign e of Debts k one box) | Petition for Recognition Main Proceeding Petition for Recognition Nonmain Proceeding |
|   |   | Filing F                               | ee (Check or                                  | Cod   |   | nal Revenu   | e Code).  | a perso  | onal, family, or                             | household pur<br>Chapter 11   | <u> </u>   |  |
| Filing Fee (Check one box)  ■ Full Filing Fee attached  □ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  □ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. |   |  |   |   | tor Chec  | Debtor is Debtor is k if: Debtor's to insider k all applica A plan is Acceptan                           | a small busin<br>not a small b<br>aggregate nor<br>s or affiliates)<br>able boxes:<br>being filed w<br>ces of the pla | ness debtor as<br>usiness debtor<br>acontingent l<br>) are less that<br>with this petition were solici | s defined in or as defined in \$2,190,0 ion. | n 11 U.S.C. § 101(51D). ed in 11 U.S.C. § 101(51D). debts (excluding debts owed 00.  ition from one or more S.C. § 1126(b). |  |  |
| ☐ Debtor 6 ☐ Debtor 6   | estimates tha   | at funds will<br>at, after any         | ation  be available exempt prop for distribut | erty is ex  | cluded and  | administrat  |   | ses paid,  |  | THIS  | S SPACE IS   | FOR COURT USE ONLY   |
| Estimated N   | Number of C  50- 99                                   | reditors  100- 199                     | 200-<br>999                                   | 1,000-<br>5,000                                     | 5,001-<br>10,000  | 10,001-<br>25,000  | 25,001-<br>50,000   | 50,001-<br>100,000   | OVER 100,000                                 |   |  |  |
| Estimated A   | Assets  \$50,001 to \$100,000                         | \$100,001 to<br>\$500,000              | \$500,001<br>to \$1<br>million                | \$1,000,001<br>to \$10<br>million                   | \$10,000,001<br>to \$50<br>million  | \$50,000,001<br>to \$100<br>million  | \$100,000,00<br>to \$500<br>million   | 1 \$500,000,001<br>to \$1 billion  |  |   |  |  |
| Estimated L  \$0 to \$50,000  | \$50,001 to \$100,000                                 | \$100,001 to<br>\$500,000              | \$500,001<br>to \$1<br>million                | \$1,000,001<br>to \$10<br>million                   | \$10,000,001<br>to \$50<br>million  | \$50,000,001<br>to \$100<br>million  | \$100,000,00<br>to \$500<br>million   | 1 \$500,000,000<br>to \$1 billion  |  |   |  |  |

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| B1 (Official For           | m 1)(1/08)  | Page 2 01 44  | Page 2  |  |
|----------------------------|---|---|---|--|
| Voluntar                   | y Petition  | Name of Debtor(s):  |   |  |
| (This page mi              | st be completed and filed in every case)  | Angle, John T.<br>Angle, Kathy A.   |   |  |
|                            | All Prior Bankruptcy Cases Filed Within Las   |   | attach additional sheet)  |  |
| Location<br>Where Filed:   | - None -  | Case Number:  | Date Filed:   |  |
| Location<br>Where Filed:   |   | Case Number:  | Date Filed:   |  |
|                            | ending Bankruptcy Case Filed by any Spouse, Partner, or   |   |   |  |
| Name of Debt<br>- None -   | tor:  | Case Number:  | Date Filed:   |  |
| District:                  |   | Relationship:   | Judge:  |  |
|                            | Exhibit A   | (To be completed if debtor is an  | Exhibit B individual whose debts are primarily consumer debts.)   |  |
| forms 10K a<br>pursuant to | pleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.)                    | I, the attorney for the petition have informed the petitioner 12, or 13 of title 11, United 5 | ner named in the foregoing petition, declare that I that [he or she] may proceed under chapter 7, 11, States Code, and have explained the relief available or the retrify that I delivered to the debtor the notice |  |
| ☐ Exhibit                  | A is attached and made a part of this petition.   | X /s/ Robert N. Honig<br>Signature of Attorney for<br>Robert N. Honig 6                       | Debtor(s) (Date)  |  |
|                            | Exh   | ibit C  |   |  |
|                            | or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.   | pose a threat of imminent and ic  | dentifiable harm to public health or safety?  |  |
|                            | Exh   | ibit D  |   |  |
| _                          | leted by every individual debtor. If a joint petition is filed, ea D completed and signed by the debtor is attached and made int petition:  | -   | l attach a separate Exhibit D.)   |  |
| ■ Exhibit                  | D also completed and signed by the joint debtor is attached a   | and made a part of this petition  | n.  |  |
|                            | Information Regardin  | _   |   |  |
| _                          | (Check any ap<br>Debtor has been domiciled or has had a residence, princip  | •   | inal assats in this District for 180  |  |
| -                          | days immediately preceding the date of this petition or for   |   |   |  |
|                            | There is a bankruptcy case concerning debtor's affiliate, go  | eneral partner, or partnership  | pending in this District.   |  |
|                            | Debtor is a debtor in a foreign proceeding and has its princ<br>this District, or has no principal place of business or assets<br>proceeding [in a federal or state court] in this District, or the<br>sought in this District. | in the United States but is a   | defendant in an action or   |  |
|                            | Certification by a Debtor Who Reside<br>(Check all app  |   | l Property  |  |
|                            | Landlord has a judgment against the debtor for possession   |   | checked, complete the following.)   |  |
|                            | (Name of landlord that obtained judgment)   |   |   |  |
|                            |   |   |   |  |
|                            |   |   |   |  |
|                            |   |   |   |  |
|                            | (Address of landlord)   |   |   |  |
|                            | Debtor claims that under applicable nonbankruptcy law, the antire monetary default that gave rise to the judgment   |   |   |  |
|                            | the entire monetary default that gave rise to the judgment.  Debtor has included in this petition the deposit with the coafter the filing of the petition.  |   |   |  |
|                            | Debtor certifies that he/she has served the Landlord with the   | his certification. (11 U.S.C. §   | 362(1)).  |  |

#### B1 (Official Form 1)(1/08)

**Voluntary Petition** 

(This page must be completed and filed in every case)

Name of Debtor(s):

Angle, John T. Angle, Kathy A.

#### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ John T. Angle

Signature of Debtor John T. Angle

X /s/ Kathy A. Angle

Signature of Joint Debtor Kathy A. Angle

Telephone Number (If not represented by attorney)

February 15, 2008

Date

#### Signature of Attorney\*

#### X /s/ Robert N. Honig

Signature of Attorney for Debtor(s)

#### Robert N. Honig 6216254

Printed Name of Attorney for Debtor(s)

Robert N. Honig

Firm Name

276 N. Addison Ave. Elmhurst, IL 60126

Address

#### (630) 834-1800

Telephone Number

#### February 15, 2008

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

 $\mathbf{X}$ 

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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Official Form 1, Exhibit D (10/06)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | John T. Angle<br>Kathy A. Angle |           | Case No. |   |
|-------|---------------------------------|-----------|----------|---|
|       |                                 | Debtor(s) | Chapter  | 7 |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.] \_\_\_\_

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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#### Official Form 1, Exh. D (10/06) - Cont.

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | /s/ John T. Angle |  |
|----------------------|-------------------|--|
|                      | John T. Angle     |  |

requirement of 11 U.S.C. § 109(h) does not apply in this district.

Date: **February 15, 2008** 

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Official Form 1, Exhibit D (10/06)

#### United States Bankruptcy Court Northern District of Illinois

|     | John T. Angle<br>Kathy A. Angle |           | Case No. |     |
|-----|---------------------------------|-----------|----------|-----|
| mie | Natily A. Allyle                |           | Case No. |     |
|     |                                 | Debtor(s) | Chapter  | _ 7 |
|     |                                 |           | •        |     |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.] \_\_\_\_

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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#### Official Form 1, Exh. D (10/06) - Cont.

| ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable            |
|---|
| statement.] [Must be accompanied by a motion for determination by the court.]                               |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or                  |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to          |
| financial responsibilities.);   |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being               |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.);   |
| ☐ Active military duty in a military combat zone.   |
| ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling        |
| requirement of 11 U.S.C. § 109(h) does not apply in this district.  |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | /s/ Kathy A. Angle |  |
|----------------------|--------------------|--|
|                      | Kathy A. Angle     |  |

Date: **February 15, 2008** 

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B6 Summary (Official Form 6 - Summary) (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | John T. Angle,<br>Kathy A. Angle |         | Case No. |   |
|-------|----------------------------------|---------|----------|---|
| •     |                                  | Debtors | Chapter  | 7 |

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|--|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property  | Yes                  | 1                | 255,500.00        |             |          |
| B - Personal Property  | Yes                  | 4                | 85,141.15         |             |          |
| C - Property Claimed as Exempt   | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims   | Yes                  | 1                |                   | 283,622.79  |          |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 5                |                   | 133,582.73  |          |
| G - Executory Contracts and<br>Unexpired Leases                                    | Yes                  | 1                |                   |             |          |
| H - Codebtors  | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 1                |                   |             | 7,518.93 |
| J - Current Expenditures of Individual<br>Debtor(s)                                | Yes                  | 2                |                   |             | 7,772.86 |
| Total Number of Sheets of ALL Schedu   | ıles                 | 18               |                   |             |          |
|  | T                    | otal Assets      | 340,641.15        |             |          |
|  |                      |                  | Total Liabilities | 417,205.52  |          |

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Form 6 - Statistical Summary (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | John T. Angle, |         | Case No |   |
|-------|----------------|---------|---------|---|
|       | Kathy A. Angle |         |         |   |
| _     |                | Debtors | Chapter | 7 |

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E)  | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00   |
| Student Loan Obligations (from Schedule F)  | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00   |
| TOTAL   | 0.00   |

#### State the following:

| Average Income (from Schedule I, Line 16)  | 7,518.93 |
|--|----------|
| Average Expenses (from Schedule J, Line 18)  | 7,772.86 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 9,576.48 |

#### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column                  |      | 18,622.79  |
|--|------|------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |            |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00       |
| 4. Total from Schedule F   |      | 133,582.73 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 152,205.52 |

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B6A (Official Form 6A) (12/07)

| In re | John T. Angle, | Case No. |
|-------|----------------|----------|
|       | Kathy A. Angle |          |

Debtors

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property  | Nature of Debtor's<br>Interest in Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |
|---|--|---|--|----------------------------|
| Single Family Residence commonly known as 1617 Moore Ave.<br>Streamwood, IL 60107   | fee simple                                 | J   | 255,000.00   | 272,625.19                 |
| Tiny fractional ownership of a small plot of land in West Virginia. Land contains 2 oil wells, which paid Debtor approx \$72.00 in royalties in 2007. Real estate taxes on Debtor's fractional share of real estate is approx. \$5.22 per year. | Tiny fraction                              | J   | 500.00   | 0.00                       |

Sub-Total > 255,500.00 (Total of this page)

Total > **255,500.00** 

\_\_\_\_\_\_\_

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B6B (Official Form 6B) (12/07)

| In re | John T. Angle, | Case No |
|-------|----------------|---------|
|       | Kathy A. Angle |         |

Debtors

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|    | Type of Property  | N O N Description and Location of Property E  | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|----|---|---|---|---|
| 1. | Cash on hand  | Cash on hand  | J   | 50.00   |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or | Checking Account No5522<br>JPMorgan Chase Bank<br>P.O. Box 260180<br>Baton Rouge, LA 70826<br>(Balance is Approximate)  | J   | 350.00  |
|    | cooperatives.   | Checking Account No6691<br>Harris, NA<br>P.O. Box 94033<br>Palatine, IL 60094<br>(Balance is Approximate)   | J   | 5.00  |
|    |   | Savings Account No7355<br>JPMorgan Chase Bank<br>P.O. Box 260180<br>Baton Rouge, LA 70826<br>(Balance is Approximate)   | J   | 392.25  |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others.  | X   |   |   |
| 4. | Household goods and furnishings, including audio, video, and computer equipment.  | Usual and typical furniture and appliances including: 2 sofas; loveseat; 4 lounge chairs; kitchen table and chairs; dining room table and chairs; china cabinet; television cabinet; 8 book cases; 8 lamps; coffee table; 2 end tables; 3 desks and chairs; 7 televisions; 2 DVD players; 5 beds; 4 dressers; nightstand; various tools; lawnmower; outdoor patio set; computer and peripherals; kitchen appliances, pots, pans, etc. |   | 1,500.00  |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.  | x   |   |   |
| 6. | Wearing apparel.  | x   |   |   |
|    |   | (Tota   | Sub-Total of this page)                     | al > <b>2,297.25</b>  |

**3** continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

| In re | John T. Angle, |
|-------|----------------|
|       | Kathy A. Angle |

| Case No. |
|----------|
|          |

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property                      | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|---|---|---|
| 7.  | Furs and jewelry.   |                  | Wedding ring and other jewelry                            | W   | 800.00  |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   |                  | 2 digital cameras; video camera                           | J   | 50.00   |
| 9.  | Interests in insurance policies.  |                  | \$180,000 Group term life insurance                       | н   | 0.00  |
|     | Name insurance company of each policy and itemize surrender or refund value of each.  |                  | \$150,000 term life insurance through Principal Insurance | W   | 0.00  |
| 10. | Annuities. Itemize and name each issuer.  | X                |   |   |   |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |   |   |   |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing  |                  | 403(b) through current place of employment                | Н   | 66,338.25   |
|     | plans. Give particulars.  |                  | 403(b) through current place of employment                | w   | 1,155.65  |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |   |   |   |
| 14. | Interests in partnerships or joint ventures. Itemize.   | X                |   |   |   |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X                |   |   |   |
| 16. | Accounts receivable.  | X                |   |   |   |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |   |   |   |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  |                  |   |   |   |

Sub-Total > (Total of this page)

68,343.90

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

| In re | John T. Angle, |
|-------|----------------|
|       | Kathy A. Angle |

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Propert   | Joint, Or                       | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|---------------------------------------|---------------------------------|---|
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | х                |                                       |                                 |   |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                       |                                 |   |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                       |                                 |   |
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | X                |                                       |                                 |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |                                       |                                 |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                       |                                 |   |
| 25. | Automobiles, trucks, trailers, and  | 2001 I           | londa Accord (85,000 miles)           | н                               | 10,000.00   |
|     | other vehicles and accessories.   | 1997 (           | Chevrolet Venture Van (105,000 miles) | J                               | 4,000.00  |
|     |   | 1992 I           | Buick LeSabre (180,000 miles)         | Н                               | 500.00  |
| 26. | Boats, motors, and accessories.   | X                |                                       |                                 |   |
| 27. | Aircraft and accessories.   | X                |                                       |                                 |   |
| 28. | Office equipment, furnishings, and supplies.  | X                |                                       |                                 |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |                                       |                                 |   |
|     |   |                  |                                       | Sub-Tot<br>(Total of this page) | al > 14,500.00  |

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

| In re | John T. Angle, | Case No |
|-------|----------------|---------|
|       | Kathy A. Angle |         |

# Debtors SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

|     | Type of Property   | N O Description and Location of Property E | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|--|--|---|---|
| 30. | Inventory.   | х  |   |   |
| 31. | Animals.   | Miniature schnauzer named "Lacy"           | J   | 0.00  |
|     | Crops - growing or harvested. Give particulars.                  | х  |   |   |
|     | Farming equipment and implements.                                | х  |   |   |
| 34. | Farm supplies, chemicals, and feed.                              | х  |   |   |
|     | Other personal property of any kind not already listed. Itemize. | х  |   |   |

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 85,141.15 |

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (12/07)

| In re | John T. Angle, |  |
|-------|----------------|--|
|       | Kathy A. Angle |  |

Debtors

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled (Check one box)  ☐ 11 U.S.C. §522(b)(2)  ☐ 11 U.S.C. §522(b)(3)  | otor claims a homestead exe                      | emption that exceeds             |   |
|---|--|----------------------------------|---|
| Description of Property   | Specify Law Providing<br>Each Exemption          | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
| Real Property Single Family Residence commonly known as 1617 Moore Ave. Streamwood, IL 60107  | 735 ILCS 5/12-901                                | 30,000.00                        | 255,000.00  |
| <u>Cash on Hand</u><br>Cash on hand   | 735 ILCS 5/12-1001(b)                            | 50.00                            | 50.00   |
| Checking, Savings, or Other Financial Accounts, Checking Account No5522 JPMorgan Chase Bank P.O. Box 260180 Baton Rouge, LA 70826 (Balance is Approximate)  | Certificates of Deposit<br>735 ILCS 5/12-1001(b) | 350.00                           | 350.00  |
| Checking Account No6691<br>Harris, NA<br>P.O. Box 94033<br>Palatine, IL 60094<br>(Balance is Approximate)   | 735 ILCS 5/12-1001(b)                            | 5.00                             | 5.00  |
| Savings Account No7355<br>JPMorgan Chase Bank<br>P.O. Box 260180<br>Baton Rouge, LA 70826<br>(Balance is Approximate)   | 735 ILCS 5/12-1001(b)                            | 392.25                           | 392.25  |
| Household Goods and Furnishings Usual and typical furniture and appliances including: 2 sofas; loveseat; 4 lounge chairs; kitchen table and chairs; dining room table and chairs; china cabinet; television cabinet; 8 book cases; 8 lamps; coffee table; 2 end tables; 3 desks and chairs; 7 televisions; 2 DVD players; 5 beds; 4 dressers; nightstand; various tools; lawnmower; outdoor patio set; computer and peripherals; kitchen appliances, pots, pans, etc. | 735 ILCS 5/12-1001(b)                            | 1,500.00                         | 1,500.00  |
| <u>Furs and Jewelry</u><br>Wedding ring and other jewelry   | 735 ILCS 5/12-1001(b)                            | 800.00                           | 800.00  |
| <u>Firearms and Sports, Photographic and Other Hol</u> 2 digital cameras; video camera  | oby Equipment<br>735 ILCS 5/12-1001(b)           | 50.00                            | 50.00   |
| Interests in IRA, ERISA, Keogh, or Other Pension 403(b) through current place of employment   | or Profit Sharing Plans<br>735 ILCS 5/12-1006    | 66,338.25                        | 66,338.25   |
| 403(b) through current place of employment  | 735 ILCS 5/12-1006                               | 1,155.65                         | 1,155.65  |
|   |  |                                  |   |

Total:

100,641.15

325,641.15

**<sup>0</sup>** continuation sheets attached to Schedule of Property Claimed as Exempt

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B6D (Official Form 6D) (12/07)

| In re | John T. Angle, |
|-------|----------------|
|       | Kathy A. Angle |

Debtors

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | A<br>H | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN | CONTINGEN   | LIO          | DISPUTED | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|--|-----------------|--------|--|-------------|--------------|----------|--|---------------------------------|
| Account No.  Citi  |                 | н      | May, 2006 Purchase Money Security 2001 Honda Accord (85,000 miles)   | Т           | T<br>E<br>D  |          |  |                                 |
|  |                 |        | Value \$ 10,000.00   | +           |              |          | 10,997.60  | 997.60                          |
| Account No. 0016301202  EMC Mortgage Corp P.O. Box 293150 Lewisville, TX 75029-3150                  |                 | J      | May, 2006 First Mortgage Single Family Residence commonly known as 1617 Moore Ave. Streamwood, IL 60107                              |             |              |          |  |                                 |
|  |                 |        | Value \$ <b>255,000.00</b>   |             |              |          | 218,292.13   | 0.00                            |
| Account No. 0016301210  EMC Mortgage Corp P.O. Box 293150 Lewisville, TX 75029-3150                  |                 | J      | May, 2006 Second Mortgage Single Family Residence commonly known as 1617 Moore Ave. Streamwood, IL 60107                             |             |              |          |  |                                 |
|  | 1               |        | Value \$ 255,000.00  |             |              |          | 54,333.06  | 17,625.19                       |
| Account No.  |                 |        | Value \$   |             |              |          |  |                                 |
| _0 continuation sheets attached  |                 |        | (Total of  | Sub<br>this |              |          | 283,622.79   | 18,622.79                       |
|  |                 |        | (Report on Summary of S  |             | Γota<br>Iule |          | 283,622.79   | 18,622.79                       |

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B6E (Official Form 6E) (12/07)

| •     |                |         |  |
|-------|----------------|---------|--|
| In re | John T. Angle, | Case No |  |
|       | Kathy A. Angle |         |  |
| _     |                | Debtors |  |

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. |
|--|
| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.  |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)  |
| ☐ Domestic support obligations   |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).  |
| ☐ Extensions of credit in an involuntary case  |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).  |
| ☐ Wages, salaries, and commissions   |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).                                      |
| ☐ Contributions to employee benefit plans  |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).  |
| ☐ Certain farmers and fishermen  |
| Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).   |
| ☐ Deposits by individuals  |
| Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).   |
| ☐ Taxes and certain other debts owed to governmental units   |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).  |
| ☐ Commitments to maintain the capital of an insured depository institution   |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).   |
| ☐ Claims for death or personal injury while debtor was intoxicated   |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).   |
|  |

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

| In re | John T. Angle, |         | Case No. |  |
|-------|----------------|---------|----------|--|
|       | Kathy A. Angle |         |          |  |
| _     |                | Debtors | ,        |  |

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  | CODEBTO | Hu<br>H<br>W<br>J<br>C |                          | O N T I N G E N | UNLIQUI       | DISPUTED | AMOUNT OF CLAIM |
|--|---------|------------------------|--------------------------|-----------------|---------------|----------|-----------------|
| Account No. <b>G00701315483</b>  | R       | ľ                      | 2006<br>Medical Services |                 | D A T E D     | 0        |                 |
| Alexian Brothers Medical Center<br>Lock Box 22589<br>22589 Network Place<br>Chicago, IL 60673-3038 |         | W                      |                          |                 | D             |          | 600.00          |
| Account No. 3739 861196 43004  |         |                        | Credit card purchases    |                 | $\frac{1}{1}$ | t        |                 |
| American Express<br>Box 0001<br>Los Angeles, CA 90096-0001   |         | W                      |                          |                 |               |          | 2,920.73        |
| Account No. <b>3725 518320 01004</b>   |         |                        | Credit card purchases    | +               | +             | +        | 2,920.73        |
| American Express<br>Box 0001<br>Los Angeles, CA 90096-0001   |         | н                      |                          |                 |               |          |                 |
|  |         |                        |                          |                 |               |          | 3,386.80        |
| Account No. 5491 1300 9839 4463  AT&T Universal Card P.O. Box 688904 Des Moines, IA 50368-8904     |         | W                      | Credit card purchases    |                 |               |          | 24,717.26       |
| continuation sheets attached   |         |                        | (Total o                 | Sub<br>of this  |               |          | 31,624.79       |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | John T. Angle, | Case No. |
|-------|----------------|----------|
|       | Kathy A. Angle |          |

| CREDITOR'S NAME,  | C            | Нι     | usband, Wife, Joint, or Community | Ç          | Ų           | 1      | Р         |                 |
|---|--------------|--------|-----------------------------------|------------|-------------|--------|-----------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. 5491 1300 1833 2189 | OD E B T O R | C<br>U |                                   | CONTINGENT | D<br>A<br>T |        | - 1       | AMOUNT OF CLAIM |
| Account No. 3491 1300 1633 2169   | 1            |        | Credit card purchases             |            | E           |        |           |                 |
| AT&T Universal Card<br>P.O. Box 688910<br>Des Moines, IA 50368-8910   |              | н      |                                   |            |             |        |           | 9,112.07        |
| Account No. <b>4266 8410 9821 5526</b>  | $\vdash$     | +      | Credit card purchases             | +          | +           | $^{+}$ | +         |                 |
| Chase Cardmember Service<br>P.O. Box 15153<br>Wilmington, DE 19886-5153   |              | н      |                                   |            |             |        |           | 659.70          |
| Account No. <b>5184 4500 6079 2052</b>  | t            | 1      | Credit card purchases             |            | t           | t      | +         |                 |
| Chase Cardmember Service<br>P.O. Box 15153<br>Wilmington, DE 19886-5153   | =            | w      |                                   |            |             |        |           | 8,687.32        |
| Account No. <b>5222 7600 3107 3604</b>  |              | H      | Credit card purchases             |            | t           | t      | $\dashv$  | ·               |
| Chase Cardmember Service<br>P.O. Box 15153<br>Wilmington, DE 19886-5153   | -            | н      |                                   |            |             |        |           | 13,733.18       |
| Account No. <b>4266 8801 2148 1473</b>  | t            | H      | Credit card purchases             |            | $\dagger$   | t      | $\dagger$ |                 |
| Chase Cardmember Service<br>P.O. Box 15153<br>Wilmington, DE 19886-5153   | -            | н      |                                   |            |             |        |           | 28,270.96       |
| Sheet no. 1 of 4 sheets attached to Schedule of   | _            |        |                                   | Sub        | tota        | al     | 7         | 00 400 00       |
| Creditors Holding Unsecured Nonpriority Claims  |              |        | (Total of                         | this       | pas         | ge`    | М         | 60,463.23       |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | John T. Angle, | C | Case No. |
|-------|----------------|---|----------|
|       | Kathy A. Angle |   |          |

|  | С        | Н   | usband, Wife, Joint, or Community                             | To         | : Lu      | ıT | n l      |                 |
|--|----------|-----|---|------------|-----------|----|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)            | CODEBTOR | L C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM | CONTINGENT | ΙC        | ы  | SPUTED   | AMOUNT OF CLAIM |
| Account No. 274*324502.1   |          |     | 2006  | Т          | E         |    |          |                 |
| Consolidated Pathology Consultant<br>75 Remittance Dr., Suite 1895<br>Chicago, IL 60675-1895                 |          | w   | Medical Services  |            | D         |    |          | 247.08          |
| Account No. xxx4684  |          |     | Credit Card Purchases   | $\dagger$  | $\dagger$ | 1  | $\dashv$ |                 |
| Discover<br>P.O. Box 30395<br>Salt Lake City, UT 84130   |          | J   |   |            |           |    |          | 44.000.04       |
|  | _        |     |   | $\perp$    | 1         | 1  |          | 14,630.91       |
| Account No. 201*492633.1  Elk Grove Lab Physicians Dept. 77-9154 Chicago, IL 60678                           |          | w   | 2006<br>Medical Services                                      |            |           |    |          | 436.10          |
| Account No. 67-8127998  Elk Grove Radiology, SC 75 Remittance Dr. Ste. 6500 Chicago, IL 60675                |          | J   | 2006<br>Medical Services                                      |            |           |    |          | 35.25           |
| Account No. <b>5466 4103 0416 7486</b>   | t        |     | Credit card purchases   | +          | +         | †  | +        |                 |
| HSBC Card Services<br>P.O. Box 37281<br>Baltimore, MD 21297-3281   |          | н   |   |            |           |    |          | 10,805.27       |
| Sheet no. <b>2</b> of <b>4</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |     | (Total of   | Sub        |           |    | - 1      | 26,154.61       |
| creations from Charles from Priority Claims  |          |     | (Total of   |            | ru        | 5  | ·/       |                 |

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 $B6F\ (Official\ Form\ 6F)\ (12/07)$  - Cont.

| In re | John T. Angle, | Case No. |
|-------|----------------|----------|
|       | Kathy A. Angle |          |

|   | 1 -             | _  |                                   | <del>-</del> | T        | 1 -         | _       |                 |
|---|-----------------|----|-----------------------------------|--------------|----------|-------------|---------|-----------------|
| CREDITOR'S NAME,                                |                 | Ηι | sband, Wife, Joint, or Community  | CON          | UNL      | D           | '       |                 |
| MAILING ADDRESS                                 | Ď               | Н  |                                   | Ň            | ĮΪ       | s           | 3 l     |                 |
| INCLUDING ZIP CODE,                             | E               | W  | DATE CLAIM WAS INCURRED AND       | T            |          | 10          | il.     |                 |
| AND ACCOUNT NUMBER                              | Ť               | J  | CONSIDERATION FOR CLAIM. IF CLAIM | N            | ũ        | U<br>T<br>E | -       | AMOUNT OF CLAIM |
| (See instructions above.)                       | C O D E B T O R | С  | IS SUBJECT TO SETOFF, SO STATE.   | G            | Ι'n      | IE          | ;       |                 |
| ·   | Ë               | ╄  |                                   | NGENT        | Ā        | ٦           | Ĺ       |                 |
| Account No. <b>020 8871 814</b>                 |                 |    | Credit card purchases             | '            | DATED    |             |         |                 |
|   |                 |    |                                   | L            | D        | ┸           | _       |                 |
| Kohl's  |                 |    |                                   |              |          | ı           |         |                 |
| P.O. Box 2983                                   |                 | J  |                                   |              |          | ı           |         |                 |
| Milwaukee, WI 53201                             |                 |    |                                   |              |          | ı           |         |                 |
| I Wilwaukee, WI 33201                           |                 |    |                                   |              |          | ı           |         |                 |
|   |                 |    |                                   |              |          | ı           |         |                 |
|   |                 |    |                                   |              |          |             |         | 798.53          |
| Account No. <b>60664547</b>                     | t               | +  | 2007                              | +            | $\vdash$ | t           | 十       |                 |
| 7.000 and 1.10. 0000 and 1.10                   | 1               |    | Medical Services                  |              |          |             |         |                 |
| l   |                 |    | Wedical Selvices                  |              |          | ı           |         |                 |
| Lake Forest Hospital                            |                 | l  |                                   |              |          | ı           |         |                 |
| 660 N. Westmoreland Rd.                         |                 | W  |                                   |              |          | ı           |         |                 |
| Lake Forest, IL 60045                           |                 |    |                                   |              |          |             |         |                 |
| <u>'</u>  |                 |    |                                   |              |          | ı           |         |                 |
|   |                 |    |                                   |              |          |             |         | 200.00          |
|   |                 |    |                                   |              |          |             |         | 200.00          |
| Account No. 697800 000 016 6459                 |                 |    | Credit card purchases             |              |          | Τ           | T       |                 |
|   | 1               |    | •                                 |              |          |             |         |                 |
| Lone Bryont                                     |                 |    |                                   |              |          |             |         |                 |
| Lane Bryant                                     |                 | Н  |                                   |              |          | ı           |         |                 |
| P.O. Box 856132                                 |                 | "  |                                   |              |          | ı           |         |                 |
| Louisville, KY 40285-6132                       |                 |    |                                   |              |          |             |         |                 |
|   |                 |    |                                   |              |          |             |         |                 |
|   |                 |    |                                   |              |          |             |         | 755.16          |
|   | ╂—              | _  |                                   | ╄            | ⊢        | ╀           | +       |                 |
| Account No. 4035232982                          |                 |    | 2006                              |              |          |             |         |                 |
|   |                 |    | Medical                           |              |          |             |         |                 |
| Quest Diagnostics                               |                 |    |                                   |              |          | ı           |         |                 |
| P.O. Box 64804                                  |                 | Н  |                                   |              |          | ı           |         |                 |
| Baltimore, MD 21264-4804                        |                 |    |                                   |              |          | ı           |         |                 |
| Baltimore, IND 21204-4004                       |                 |    |                                   |              |          |             |         |                 |
|   |                 |    |                                   |              |          |             |         |                 |
|   |                 |    |                                   |              |          |             |         | 63.55           |
| Account No. <b>F00021550785</b>                 | 1               | T  | 2007                              | +            | $\top$   | t           | +       |                 |
| 7.ccount 100. 1 00021330703                     | -               |    | Medical Services                  |              |          | ı           |         |                 |
| L   |                 |    | INICAICAI GCI VICCS               | 1            |          |             |         |                 |
| St. Alexius Medical Center                      |                 | ١. |                                   | 1            |          |             |         |                 |
| 21219 Network Place                             |                 | J  |                                   | 1            |          |             |         |                 |
| Chicago, IL 60673-1212                          |                 |    |                                   |              |          |             |         |                 |
| - '   |                 |    |                                   | 1            |          |             |         |                 |
|   |                 |    |                                   | 1            |          |             |         | 50.00           |
|   |                 |    |                                   | 丄            | $\perp$  |             | $\perp$ | 30.00           |
| Sheet no. 3 of 4 sheets attached to Schedule of |                 |    | \$                                | Sub          | tota     | al          |         | 4.00= 0.1       |
| Creditors Holding Unsecured Nonpriority Claims  |                 |    | (Total of t                       | his          | paş      | ge)         | ,       | 1,867.24        |

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 $B6F\ (Official\ Form\ 6F)\ (12/07)$  - Cont.

| In re | John T. Angle, | Case No. |
|-------|----------------|----------|
|       | Kathy A. Angle |          |

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. 5407 0700 0753 3228  Union Plus Credit Card P.O. Box 88000 Baltimore, MD 21288-0001 | CODEBTOR | Hu<br>H<br>W<br>J<br>C        | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  Credit card purchases | CONTINGENT |            | 1 |   | AMOUNT OF CLAIM     |
|--|----------|-------------------------------|--|------------|------------|---|---|---------------------|
| Account No. 33587503  Wells Fargo Financial P.O. Box 98798 Las Vegas, NV 89193-8796  |          | н                             | Line of Credit   |            |            |   |   | 12,769.86<br>703.00 |
| Account No.  |          |                               |  |            |            |   |   |                     |
| Account No.  |          |                               |  |            |            |   |   |                     |
| Account No.  |          |                               |  |            |            |   |   |                     |
| Sheet no. <u>4</u> of <u>4</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims   |          | Subtotal (Total of this page) |  |            |            |   | ) | 13,472.86           |
|  |          |                               | (Report on Summary of So   |            | Γot<br>dul |   | ) | 133,582.73          |

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B6G (Official Form 6G) (12/07)

| In re | John T. Angle, | Case No |
|-------|----------------|---------|
|       | Kathy A. Angle |         |

Debtors

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 08-04706 Doc 1 Filed 02/29/08 Entered 02/29/08 10:51:12 Desc Main Document Page 24 of 44

B6H (Official Form 6H) (12/07)

| In re | John T. Angle, | Case No. |
|-------|----------------|----------|
|       | Kathy A. Angle |          |

Debtors

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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**B6I (Official Form 6I) (12/07)** 

|       | John T. Angle  |           |          |  |
|-------|----------------|-----------|----------|--|
| In re | Kathy A. Angle |           | Case No. |  |
|       |                | Debtor(s) |          |  |

#### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Dahtaula Manital Status                                   | DEPENDENTS O   | DE DERTOR A | ND SDO                 | IISF              |          |               |
|---|--|-------------|------------------------|-------------------|----------|---------------|
| Debtor's Marital Status:                                  | RELATIONSHIP(S):                                     |             | GE(S):                 | UDE               |          |               |
| Married   | Daughter Daughter Daughter Daughter                  | AC          | 5E(S):<br>17<br>5<br>7 |                   |          |               |
| Employment:   | DEBTOR   | •           |                        | SPOUSE            |          |               |
|   | stor   | Operation   | ns Dire                |                   |          |               |
| Name of Employer Wi                                       | illow Creek Community Church                         | Willow C    | Creek C                | ommunity Cl       | hurch    |               |
| How long employed 14                                      | years  | 3 years     |                        |                   |          |               |
|   | East Algonquin Road<br>arrington, IL 60010           | 67 East A   |                        | uin Road<br>60010 |          |               |
| INCOME: (Estimate of average or pro                       | jected monthly income at time case filed)            |             |                        | DEBTOR            |          | SPOUSE        |
| 1. Monthly gross wages, salary, and co                    | mmissions (Prorate if not paid monthly)              |             | \$                     | 4,927.85          | \$       | 4,595.00      |
| 2. Estimate monthly overtime                              |  |             | \$                     | 0.00              | \$       | 0.00          |
| 3. SUBTOTAL   |  |             | \$                     | 4,927.85          | \$       | 4,595.00      |
| 4. LESS PAYROLL DEDUCTIONS                                |  |             | Φ.                     | 000.00            |          | F00 70        |
| a. Payroll taxes and social securit                       | У  |             | \$                     | 923.09            | \$       | 568.79        |
| b. Insurance  |  |             | \$                     | 471.84            | \$       | 0.00          |
| c. Union dues   |  |             | \$                     | 0.00              | \$       | 0.00          |
| d. Other (Specify): 403 B                                 |  |             | \$<br>\$               | 50.74<br>0.00     | \$<br>   | 45.46<br>0.00 |
| 5. SUBTOTAL OF PAYROLL DEDU                               | CTIONS   |             | \$                     | 1,445.67          | \$       | 614.25        |
| 6. TOTAL NET MONTHLY TAKE H                               | OME PAY  |             | \$                     | 3,482.18          | \$       | 3,980.75      |
|   | usiness or profession or farm (Attach detailed state | ement)      | \$                     | 0.00              | \$       | 0.00          |
| 8. Income from real property                              |  |             | \$                     | 0.00              | \$       | 0.00          |
| 9. Interest and dividends                                 |  |             | \$                     | 0.00              | \$       | 0.00          |
| dependents listed above                                   | payments payable to the debtor for the debtor's use  | or that of  | \$                     | 0.00              | \$       | 0.00          |
| 11. Social security or government assis (Specify):        | itance   |             | \$                     | 0.00              | \$       | 0.00          |
|   |  |             | \$                     | 0.00              | \$       | 0.00          |
| 12. Pension or retirement income 13. Other monthly income |  |             | \$                     | 0.00              | \$       | 0.00          |
| (Specify): Speaking Fees (                                | net)   |             | \$                     | 50.00             | \$       | 0.00          |
| Royalty from oil  |  |             | \$                     | 6.00              | \$       | 0.00          |
|   |  |             | ф                      | <b>56 00</b>      | Φ.       | 0.00          |
| 14. SUBTOTAL OF LINES 7 THROU                             | JGH 13   |             | \$                     | 56.00             | <u> </u> | 0.00          |
| 15. AVERAGE MONTHLY INCOME                                | (Add amounts shown on lines 6 and 14)                |             | \$                     | 3,538.18          |          | 3,980.75      |
| 16. COMBINED AVERAGE MONTH                                | ILY INCOME: (Combine column totals from line         | 15)         |                        | \$                | 7,518.   | 93            |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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B6J (Official Form 6J) (12/07)

|       | John T. Angle  |           |          |  |
|-------|----------------|-----------|----------|--|
| In re | Kathy A. Angle |           | Case No. |  |
|       |                | Debtor(s) | _        |  |

#### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case

| filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22 |               | ge monthly          |
|---|---------------|---------------------|
| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."   | ete a separat | te schedule of      |
| 1. Rent or home mortgage payment (include lot rented for mobile home)   | \$            | 1,851.50            |
| a. Are real estate taxes included? Yes No _X_   | -             |                     |
| b. Is property insurance included? Yes NoX  |               |                     |
| 2. Utilities: a. Electricity and heating fuel   | \$            | 275.00              |
| b. Water and sewer  | \$            | 60.00               |
| c. Telephone  | \$            | 263.00              |
| d. Other Cable TV and Internet  | \$            | 86.00               |
| 3. Home maintenance (repairs and upkeep)  | \$            | 200.00              |
| 4. Food   | \$            | 850.00              |
| 5. Clothing   | \$            | 275.00              |
| 6. Laundry and dry cleaning   | \$            | 100.00              |
| 7. Medical and dental expenses  | \$            | 250.00              |
| 8. Transportation (not including car payments)  | \$            | 575.00              |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.   | \$            | 100.00              |
| 10. Charitable contributions  | \$            | 1,100.00            |
| 11. Insurance (not deducted from wages or included in home mortgage payments)   |               |                     |
| a. Homeowner's or renter's  | \$            | 50.00               |
| b. Life   | \$            | 41.00               |
| c. Health   | \$            | 0.00                |
| d. Auto   | \$            | 195.00              |
| e. Other  | \$            | 0.00                |
| 12. Taxes (not deducted from wages or included in home mortgage payments)   |               |                     |
| (Specify) Real Estate Taxes   | \$            | 400.00              |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the  |               |                     |
| plan)   |               |                     |
| a. Auto   | \$            | 310.58              |
| b. Other Second Mortgage  | \$            | 533.78              |
| c. Other  | \$            | 0.00                |
| 14. Alimony, maintenance, and support paid to others  | \$            | 0.00                |
| 15. Payments for support of additional dependents not living at your home   | \$            | 0.00                |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  | \$            | 0.00                |
| 17. Other See Detailed Expense Attachment   | \$            | 257.00              |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,  | \$            | 7,772.86            |
| if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)   | Ψ             | 7,772.00            |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year   |               |                     |
| following the filing of this document:  |               |                     |
| ronowing the fining of this document.   |               |                     |
| 20 STATEMENT OF MONTHLY NET INCOME  | _             |                     |
| 20. STATEMENT OF MONTHLY NET INCOME   | ¢.            | 7 540 02            |
| a. Average monthly income from Line 15 of Schedule I  | \$            | 7,518.93            |
| <ul><li>b. Average monthly expenses from Line 18 above</li><li>c. Monthly net income (a. minus b.)</li></ul>  | \$            | 7,772.86<br>-253.93 |
| c. Monthly net income (a. minus b.)   | J)            | -200.90             |

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 $B6J\ (Official\ Form\ 6J)\ (12/07)$ 

John T. Angle Kathy A. Angle

|         | Case No. |  |
|---------|----------|--|
| D 1: () |          |  |

Debtor(s)

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

#### **Other Expenditures:**

| Personal Care                   | \$<br>100.00 |
|---------------------------------|--------------|
| Children's needs / school needs | \$<br>100.00 |
| Weight Watchers                 | \$<br>17.00  |
| Health club                     | \$<br>40.00  |
| Total Other Expenditures        | \$<br>257.00 |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

| In re                                     | John T. Angle<br>Kathy A. Angle |           | Case No. |   |  |
|---|---------------------------------|-----------|----------|---|--|
|   |                                 | Debtor(s) | Chapter  | 7 |  |
|   |                                 |           |          |   |  |
|   |                                 |           |          |   |  |
| DECLARATION CONCERNING DEBTOR'S SCHEDULES |                                 |           |          |   |  |

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

|    | I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of |
|----|--|
| 20 | sheets, and that they are true and correct to the best of my knowledge, information, and belief.       |

| Date | February 15, 2008 | Signature | /s/ John T. Angle John T. Angle Debtor         |
|------|-------------------|-----------|--|
| Date | February 15, 2008 | Signature | /s/ Kathy A. Angle Kathy A. Angle Joint Debtor |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (12/07)

#### United States Bankruptcy Court Northern District of Illinois

| In re | John T. Angle<br>Kathy A. Angle |           | Case No. | Case No. |  |
|-------|---------------------------------|-----------|----------|----------|--|
|       |                                 | Debtor(s) | Chapter  | 7        |  |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT      | SOURCE                              |
|-------------|-------------------------------------|
| \$4,241.54  | Wife income 2008 year to date       |
| \$4,852.36  | Husband income 2008 year to date    |
| \$48,892.21 | Wife income 2007 from employment    |
| \$59,837.52 | Husband income 2007 from employment |
| \$44,943.69 | Wife income 2006 from employment    |
| \$51,050.70 | Husband income 2006 from employment |

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE **\$1,500.00** Speaking fees

\$200.00 Oil Well royalties (approx.)

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR **PAYMENTS** AMOUNT PAID **OWING** Chase Cardmember Service Monthly \$2,700.00 \$28,270.96 P.O. Box 15153 (approx) Wilmington, DE 19886-5153 AT&T Universal Card Monthly \$2,000.00 \$24,717.26 P.O. Box 688904 (approx) Des Moines, IA 50368-8904

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

DATES OF PAID OR

PAYMENTS/ VALUE OF AMOUNT STILL

ITOR TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors*: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR DATE OF PAYMENT

AMOUNT PAID

OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY STATUS OR AND CASE NUMBER NATURE OF PROCEEDING AND LOCATION DISPOSITION

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None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN
DESCRIPTION AND VALUE OF
PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN OF COURT CASE TITLE & NUMBER

DATE OF

DESCRIPTION AND VALUE OF

3

SE TITLE & NUMBER ORDER PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

4

\$2,500.00

Robert N. Honig 276 N. Addison Ave. Elmhurst, IL 60126

Cricket Debt Counseling 10121 S.E. Sunnyside Rd. Ste. 300 Clackamas, OR 97015 \$36

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

TRANSFER(S) IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY Page 33 of 44

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

5

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

NAME AND ADDRESS OF OWNER

**PROPERTY** 

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

NOTICE

LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

CRE OF BUSINESS ENDING DATES

None

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

#### DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

.

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

DATE OF INVENTORY

INVENTORY SUPERVISOR

b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

None

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21 . Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE
NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

22 . Former partners, officers, directors and shareholders

None a If the debtor is a partnership list each member who withdrew from the partners

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS
OF RECIPIENT,
DATE AND PURPOSE
OF WITHDRAWAL
OF PROPERTY

AMOUNT OF MONEY
OR DESCRIPTION AND
VALUE OF PROPERTY

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION TAXPAYER IDENTIFICATION NUMBER (EIN)

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25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

8

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | February 15, 2008 | Signature | /s/ John T. Angle  |
|------|-------------------|-----------|--------------------|
|      |                   |           | John T. Angle      |
|      |                   |           | Debtor             |
|      |                   |           |                    |
| Date | February 15, 2008 | Signature | /s/ Kathy A. Angle |
|      | <del></del>       |           | Kathy A. Angle     |
|      |                   |           | Joint Debtor       |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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Form 8 (10/05)

#### **United States Bankruptcy Court** Northern District of Illinois

| In re                | John T. Angle<br>Kathy A. Angle                                |                               |   | Case No.   |   |  |
|----------------------|--|-------------------------------|---|--|---|--|
| -                    |  |                               | Debtor(s)   | Chapter  | 7   |  |
|                      | CHAPTER 7 INI  | DIVIDUAL DEBT                 | OR'S STATEME  | NT OF INT  | TENTION   |  |
| ■ I                  | have filed a schedule of assets and liab                       | vilities which includes deb   | ts secured by property o                                  | f the estate.  |   |  |
| ] I                  | have filed a schedule of executory con                         | tracts and unexpired leases   | s which includes person                                   | al property subj   | ect to an unexpire                                    | ed lease.  |
| ■ I                  | intend to do the following with respec                         | t to property of the estate v | which secures those deb                                   | ts or is subject to  | o a lease:  |  |
| Descripti            | on of Secured Property   | Creditor's Name               | Property will be<br>Surrendered                           | Property<br>is claimed<br>as exempt                                  | Property will be redeemed pursuant to 11 U.S.C. § 722 | Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c) |
| 2001 H               | onda Accord (85,000 miles)                                     | Citi                          |   |  |   | Х  |
| known<br>1617 M      | Family Residence commonly<br>as<br>oore Ave.<br>wood, IL 60107 | EMC Mortgage Cor              | p Debtor will re<br>regular paym                          |  | l and continue  | to make  |
| known<br>1617 M      | Family Residence commonly<br>as<br>oore Ave.<br>wood, IL 60107 | EMC Mortgage Cor              | -   | Debtor will retain collateral and continue to make regular payments. |   |  |
| Description Property | on of Leased   | Lessor's Name                 | Lease will be assumed pursuan to 11 U.S.C. § 362(h)(1)(A) | ıt   |   |  |
| Date <u></u>         | February 15, 2008  | Signature                     | /s/ John T. Angle John T. Angle Debtor                    |  |   |  |
| Date <u>F</u>        | February 15, 2008  | Signature                     | /s/ Kathy A. Angle Kathy A. Angle Joint Debtor            |  |   |  |

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#### United States Bankruptcy Court Northern District of Illinois

|                | 146   | of therm District of Initiols   |  |  |
|----------------|---|---|--|--|
| In re          | John T. Angle<br>Kathy A. Angle   |   | Case No.   |  |
|                |   | Debtor(s)   | Chapter  | 7  |
|                | DISCLOSURE OF COMPI   | ENSATION OF ATTOR   | NEY FOR DI   | EBTOR(S)   |
| cc             | pursuant to 11 U.S.C. § 329(a) and Bankruptcy From pensation paid to me within one year before the free rendered on behalf of the debtor(s) in contemplation  | iling of the petition in bankruptcy,  | or agreed to be pai  | id to me, for services rendered or to  |
|                | For legal services, I have agreed to accept   |   | \$   | 2,500.00   |
|                | Prior to the filing of this statement I have received   | d   | \$   | 2,500.00   |
|                | Balance Due   |   | \$   | 0.00   |
| 2. Tl          | ne source of the compensation paid to me was:   |   |  |  |
|                | ■ Debtor □ Other (specify):   |   |  |  |
| 3. TI          | ne source of compensation to be paid to me is:  |   |  |  |
|                | ■ Debtor □ Other (specify):   |   |  |  |
| <b>4</b> . ■   | I have not agreed to share the above-disclosed con  | npensation with any other person u  | nless they are mem   | bers and associates of my law firm.  |
|                | I have agreed to share the above-disclosed comper<br>copy of the agreement, together with a list of the n   |   |  |  |
| a.<br>b.<br>c. | return for the above-disclosed fee, I have agreed to Analysis of the debtor's financial situation, and ren Preparation and filing of any petition, schedules, st Representation of the debtor at the meeting of cred [Other provisions as needed]  Exemption planning; preparation and and filing of motions pursuant to 11 U | dering advice to the debtor in deter<br>atement of affairs and plan which r<br>itors and confirmation hearing, and<br>filing of reaffirmation agreeme | mining whether to<br>may be required;<br>I any adjourned hea<br>ents and applica | file a petition in bankruptcy; urings thereof; ations as needed; preparation |
| 6. B           | y agreement with the debtor(s), the above-disclosed to Representation of the debtors in any cany other adversary proceeding.  |   |  | es, relief from stay actions or  |
|                |   | CERTIFICATION   |  |  |
|                | certify that the foregoing is a complete statement of a nkruptcy proceeding.  | nny agreement or arrangement for p  | ayment to me for re  | epresentation of the debtor(s) in  |
| Dated:         | February 15, 2008   | /s/ Robert N. Honig   | 3  |  |
|                |   | Robert N. Honig 62<br>Robert N. Honig<br>276 N. Addison Av<br>Elmhurst, IL 60126<br>(630) 834-1800  | 216254<br>e.   |  |

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

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#### **B 201** (04/09/06)

#### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

| I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code. |  |                            |  |  |  |  |
|--|--|----------------------------|--|--|--|--|
| Robert N. Honig 6216254  | X /s/ Robert N. Honig                                | February 15, 2008          |  |  |  |  |
| Printed Name of Attorney   | Signature of Attorney                                | Signature of Attorney Date |  |  |  |  |
| Address:   |  |                            |  |  |  |  |
| 276 N. Addison Ave.  |  |                            |  |  |  |  |
| Elmhurst, IL 60126   |  |                            |  |  |  |  |
| (630) 834-1800   |  |                            |  |  |  |  |
| I (We), the debtor(s), affirm that I (we) have   | Certificate of Debtor received and read this notice. |                            |  |  |  |  |
| John T. Angle  |  |                            |  |  |  |  |
| Kathy A. Angle   | X /s/ John T. Angle                                  | February 15, 2008          |  |  |  |  |
| Printed Name of Debtor   | Signature of Debtor                                  | Date                       |  |  |  |  |
|  |  |                            |  |  |  |  |
| Case No. (if known)  | X /s/ Kathy A. Angle                                 | February 15, 2008          |  |  |  |  |
|  | Signature of Joint Debtor (if any)                   | Date                       |  |  |  |  |

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#### **United States Bankruptcy Court** Northern District of Illinois

| In re                | John T. Angle<br>Kathy A. Angle   |                                      | Case No.  |    |  |
|----------------------|---|--------------------------------------|-----------|----|--|
| 111 10               |   | Debtor(s)                            | Chapter 7 |    |  |
|                      | V   | ERIFICATION OF CREDITOR M            | ATRIX     |    |  |
| Number of Creditors: |   |                                      |           | 24 |  |
|                      | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. |                                      |           |    |  |
| Date:                | February 15, 2008   | /s/ John T. Angle                    |           |    |  |
|                      |   | John T. Angle<br>Signature of Debtor |           |    |  |
| Date:                | February 15, 2008   | /s/ Kathy A. Angle                   |           |    |  |
|                      |   | Kathy A. Angle                       |           |    |  |
|                      |   | Signature of Debtor                  |           |    |  |

Alexian Brothers Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673-3038

AMCA P.O. Box 1235 Elmsford, NY 10523-0935

American Express Box 0001 Los Angeles, CA 90096-0001

AT&T Universal Card P.O. Box 688904 Des Moines, IA 50368-8904

AT&T Universal Card P.O. Box 688910 Des Moines, IA 50368-8910

Chase Cardmember Service P.O. Box 15153 Wilmington, DE 19886-5153

Citi

Consolidated Pathology Consultant 75 Remittance Dr., Suite 1895 Chicago, IL 60675-1895

Discover P.O. Box 30395 Salt Lake City, UT 84130

Elk Grove Lab Physicians Dept. 77-9154 Chicago, IL 60678

Elk Grove Radiology, SC 75 Remittance Dr. Ste. 6500 Chicago, IL 60675

EMC Mortgage Corp P.O. Box 293150 Lewisville, TX 75029-3150

Harris & Harris, Ltd. 600 W. Jackson Blvd. Ste. 400 Chicago, IL 60661

Harvard Collection Services 4839 N. Elston Ave. Chicago, IL 60630

HSBC Card Services P.O. Box 37281 Baltimore, MD 21297-3281

Kohl's P.O. Box 2983 Milwaukee, WI 53201

Lake Forest Hospital 660 N. Westmoreland Rd. Lake Forest, IL 60045

Lane Bryant
P.O. Box 856132
Louisville, KY 40285-6132

Malcolm S. Gerald & Associates 332 S. Michigan Ave Suite 600 Chicago, IL 60604

Pro Com Services of IL, Inc. P.O. Box 202 Springfield, IL 62705-0202

Quest Diagnostics P.O. Box 64804 Baltimore, MD 21264-4804

St. Alexius Medical Center 21219 Network Place Chicago, IL 60673-1212

Union Plus Credit Card P.O. Box 88000 Baltimore, MD 21288-0001

Wells Fargo Financial P.O. Box 98798 Las Vegas, NV 89193-8796